State of Caring

The cost of caring in Scotland 2025

60 YEARS

carers SCOTLAND

Contents

About this research

State of Caring is the most comprehensive research into the lives and experiences of unpaid carers in Scotland, and across the UK.

This year's State of Caring received responses for 10,539 people – of which **1781** were from unpaid carers in Scotland.

The report provides insights from **1781** responses from these carers in Scotland. This survey is not a representative survey.

As not everyone completed every question in the survey, some figures are based on responses from less than this number.

Thank you

Carers Scotland would like to thank everyone who took the time to fill out this survey, as well as the carers who helped us to test the survey and the many organisations, employers and supporters who shared and encouraged carers to take part.

The responses will be used in all our policy and campaigning work over the next year, including in the Scottish Election 2026.

We are very grateful to all the carers who shared their experiences with us.

Introduction

Throughout Scotland, 627,715 people are providing unpaid care to family member, partner, friend, or neighbour who is disabled, has an illness or long-term condition, or who need extra help as they get older[1]. Every day nearly 1000 people will become unpaid carers, 44% of whom will be in paid employment.[2]

The economic value of unpaid care is £15.9 billion a year[3].This is almost equivalent to the budget provided to health boards in Scotland (£16.2 billion) and dwarfs the budget for social care[4] . However, despite this enormous contribution, this comes at a significant personal cost, a cost that is often undervalued and overlooked.

This research focuses on the costs of caring: financial, health, opportunity, and longer-term costs for unpaid carers. Unpaid carers often face additional costs, such as specialist food, care, and higher electricity bills. With the increase in the cost of living, and insufficient support from the social security system, many carers are finding it increasingly difficult to make ends meet, cutting back on essentials and building up debt simply to get by. Caring can also have a lasting impact on carers' financial future with many finding retirement savings impacted, even after their caring responsibilities have ended.

There is also a significant human cost involved in providing unpaid care. Caring can have a profound impact on carers' own health and wellbeing. When insufficient support is provided by health and social care services, caring is causing significant physical and mental health harm. Health issues can worsen with the intensity and duration of care, with carers too busy to seek help or treatment when caring and where little support is offered by health and social care services to ensure that they are able to access primary and secondary care.

Unpaid caring can also mean missing out on wider opportunities – to be in paid employment, to be in education, to take part in activities that improve wellbeing and to spend time with friends and family.

The support that unpaid carers provide is invaluable to Scotland and to our society but State of Caring 2025 provides clear evidence that the cost of caring is simply too high. The foundations of support from public services are being eroded, from years of austerity and rising demand, damaging the lives and futures of unpaid carers and those they support.

If we do not transform our approach to supporting carers, ever more unpaid carers will reach breaking point, with huge implications for themselves and the people they care for, as well as the NHS, the social care system, the economy and society as a whole.

[1] Scotland's Census 2022
[2] Cycles of caring: transitions in and out of unpaid care, Carers UK (2023)
[3] Valuing Carers 2022, Carers Scotland and Centre for Care (2024)
[4] Scottish Budget 2025 to 2026, Scottish Government

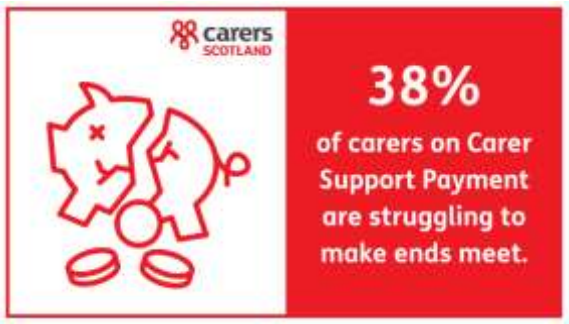
The financial cost of caring

State of Caring 2025 shows that the cost of care to unpaid carers own incomes remains far too high, exacerbated by increasing costs of living and shows that some groups of carers are living with even greater financial insecurity.

Unpaid carers continue to experience significant financial strain across all areas of their lives, with too many cutting back on essentials and living with debt.

One in five **(20%)** unpaid carers were struggling to make ends meet but this doubles to nearly half **(44%)** of those carers in receipt of a means tested benefit with a carer element or addition, such as Universal Credit or Pension Credit.

Despite expanded eligibility for Carer Support Payment to most full-time students, an increase in the earnings threshold to £196 per week, and the longstanding additional payment of Carer's Allowance Supplement, over a third **(38%)** of carers on Carer Support Payment were struggling to make ends meet.



Nearly a third of disabled[5] unpaid carers **(30%)** said that they were struggling to make ends meet. And even amongst those carers in paid employment, one in six **(16%)** carers said they faced such struggles.

"I had to give up a very well-paid job to look after my husband and we still have a mortgage to pay so things are hard."

[Unpaid carer, State of Caring 2025]

Unpaid carers who have been caring for longer or for more hours each week also experience greater financial strain, A quarter of carers **(24%)** who are caring for 35 hours or more are struggling to make ends meet compared to **15%** of those caring for 34 hours or less.

There is a similar, though less pronounced, difference for the length of time unpaid carers have been providing care. One in six **(17%)** of those caring for less than a year struggling to make ends meet compared to one in four **(23%)** of those caring for more than 10 years.

[5] Disabled Carers includes any carer who identified themselves as disabled under the definition used under the Equality Act 2010 – "if you have a physical or mental impairment that has a 'substantial' and 'long-term' negative effect on your ability to do normal daily activities."

Cutting back

The financial consequences of struggling to make ends meet are significant. Nearly half **(48%)** of unpaid carers have cut back on essentials such as food and heating to make ends meet, rising to **68%** of those on Carer Support Payment and **86%** of those carers in receipt of means tested benefits.

For those unpaid carers who said they are struggling to make ends meet, a shocking **90%** have cut back on essentials. Paid work provides little protection. Even for those unpaid carers who can continue to sustain paid employment, **41%** are cutting back on essentials.

"I only get basic pension, struggling with my own bills and shopping but cannot see my caree hungry."
[Unpaid carer, State of Caring 2025]

"I worry about costs of caring for them (petrol, time off work etc). [I am] in receipt Carer's Allowance but does not provide me with this."
[Unpaid carer, State of Caring 2025]

Many unpaid carers also said they had found it more difficult to afford the costs of care because of the rising cost of living. Two in five **(42%)** carers said that they were struggling to meet these costs, rising to **72%** of those receiving means tested benefits.

Worryingly, nearly a quarter **(24%)** of older unpaid carers were struggling to afford the cost of care. This at a time in their lives when they may be more likely to have their own health concerns and require a greater level of support to provide care. With older carers ineligible for Carer Support Payment, there is minimal financial assistance available to support them as carers.

Cutting back on essentials and being unable to meet the costs of caring is deeply concerning. It is therefore of little wonder that two thirds **(67%)** of unpaid carers have been forced to cut back on hobbies, treats and social activities that improve wellbeing. This rises to **79%** of disabled carers, **90%** of carers on means tested benefits and a shocking **98%** of those who said they were struggling to make ends meet.

"My only income is from state benefits, Carers Support Payment and UC [Universal Credit]. There is no wiggle room on this tight-line, no luxuries or even simple comforts. I cannot afford to heat my own home in winter and I struggle to eat healthy, nutritious food. I cannot afford new clothes, shoes etc and can only buy second hand. I have no social life as even buying a high street coffee is beyond my means. I have to live a very small, frugal life."
[Unpaid carer, State of Caring 2025]

This lack of support to enable unpaid carers to meet the costs of essentials, care support and even smaller comforts, sends a clear message to carers that, as a society, we believe that their severe struggle is a price that carers are simply expect to pay.

Living with debt and worries for the future

This struggle to make ends meet means that too many unpaid carers live with debt because of their caring role.

The highest percentage of unpaid carers who said that they were in debt as consequence of caring, is those in receipt of social security benefits, with a quarter **(25%)** of carers on reserved means tested benefits with a carer element or addition experiencing debt, and **(15%)** of carers who received Carer Support Payment and disabled carers also in living with debt.

Over a third **(35%)** of unpaid carers said they had taken out a bank loan, used credit cards or a bank overdraft to make ends meet as did half **(49%)** of disabled carers, **50%** of those on Carer Support Payment and **34%** of carers in paid employment. For too many carers, building up debt has become an inevitable feature of taking on a caring role.

Evidence suggests that debt, particularly problem debt, has a negative impact on individual mental health and wellbeing. For example, the 2023 Financial Lives Survey found that 24% of respondents said their finances had affected their mental health. Compared to those without debts, individuals are more likely to experience depression and anxiety and be diagnosed with a mental health disorder[6]. We explore the impact on caring on mental health, including the impact of financial insecurity, in a later section on Health.

The levels of debt and struggle that unpaid carers face, mean that nearly half **(48%)** of carers said that they worried about their living costs and whether or not they can manage in the future. Again, this sense of worry increases for those on the lowest incomes but is significant across all groups of carers.

Across all groups of unpaid carers, this concern over their ability to manage financially in the future was high, with the highest levels amongst those in receipt of means tested benefits **(68%)** and Carer Support Payment **(64%)**, disabled carers **(60%)** and parent carers of a disabled child 18 or under **(58%)**.

[6] Consumer debt and mental health, UK Parliament, Post it Note 732, October 2024

Living with long term financial consequences of caring

The impact of caring on income can have long term and serious consequences for financial security. Nearly a quarter **(73%)** of unpaid carers said they were worried about the impact that their caring role would have on the future.

Worryingly, one in five **(21%)** unpaid carers had cut back, paused or stopped paying into their pension, meaning that the financial insecurity they face could be a feature into retirement, often long after their caring role has ended.

For some groups of unpaid carers, this rose sharply, for example, half **(49%)** of those who said they were struggling to make ends meet and **36%** of those in receipt of Carer Support Payment said that they had been forced to cut back, paused or stopped paying into their pension because of the impact of caring on their finances.

"I cannot work properly. My pension contributions are shot to pieces. I am not able to financially plan for the future and I went bankrupt because of my caring role."

[Unpaid carer, State of Caring 2025]

Unpaid carers with children and child poverty

This year's State of Caring report also enabled a specific focus on the financial impact of caring on families with children - for parent carers with a child aged 18 or under and for those who are caring for an adult and also have dependent child/ren under 18.

The Scottish Government has said that eradicating child poverty is the single greatest priority for the government[7]. Latest estimates are that 22%[8] of children in Scotland are living in poverty and, despite this Government commitment, including by ensuring that parents with a disabled adult or child are a priority group within the Child Poverty Delivery Plan[9], it is clear from State of Caring 2025 that the level of financial insecurity unpaid carers with children live with continues to be a significant issue.

Parent carers with a disabled child

This section focuses primarily on income and, whilst it is not, and is not intended to be, a formal estimate of child poverty, State of Caring 2025 does indicate that too many parent carers continue to struggle to access the support they across all aspects of their lives including in social care, education, paid employment and to sustain good health and wellbeing.

State of Caring 2025 found that over a quarter **(27%)** of parent carers with a disabled child aged 18 or under were struggling to make ends meet. Nearly two thirds **(62%)** were cutting back on essentials such

[7] Programme for Government 2024-25: Serving Scotland, Scottish Government (2024)
[8] Poverty and Income Inequality in Scotland 2021-24, An Accredited Official Statistics Publication for Scotland, Scottish Government, 2025
[9] Best Start, Bright Futures Tackling Child Poverty Delivery Plan 2022-2026, Scottish Government

as heating and food to make ends meet. For those parent carers on means-tested benefits such as Universal Credit, this grew to **38%** and **71%** respectively.

One in six **(17%)** were living in debt because of their caring role. This level of debt is the one of the highest percentages of all groups of carers within the State of Caring survey. More than half **(56%)** had taken out a loan from a bank, used credit cards or a bank overdraft to make ends meet, building unsustainable debt for the future. Again, these grew for those on means-tested benefits to **23%** and **70%** respectively.

Worryingly **58%** of parent carers with a disabled child have been forced to reduce hours or give up paid employment because of their caring responsibilities, making it even harder to afford life's essentials. When we include the responses from parent carers that said that someone else in their household (eg. a spouse or partner) had also reduced working hours or given up work, more than two thirds **(68%)** of families with a disabled child find their employment, and thus financial security, affected by their caring role.

"I have left secure permanent contract to manage the needs of my twins. I struggled to balance their needs with other demands on me. I am currently employed on a bank contract and do ad hoc work. I worry about my financial future and what this might look like without the job security I had previously. "

[Parent carer, State of Caring 2025]

The importance of enabling children to thrive, and for disabled children to have access to the same opportunities as their peers, is crucial to their wellbeing and development and integral to the principles of the Scottish Government's priority of "Getting It Right for Every Child"[10]and its associated wellbeing indicators.

"[My main need as a carer is] adequate support from the local education authority to enable my child to attend school. Needs not great enough for specialist provision and mainstream cannot support."

[Parent carer, State of Caring 2025]

However, it is clear that for too many parent carers, opportunities to sustain and improve wellbeing for both children and families are severely limited by income. For example, in these households **95%** of parent carers said that they had cut back spending on hobbies, treats, and social activities that improve wellbeing. With high levels of debt, and with families already being forced to cut back on essentials, these opportunities have become unaffordable yet are vital to enable both children and families to thrive.

[10] Getting it Right for Every Child, Scottish Government: Getting it right for every child (GIRFEC) is Scotland's long standing, national commitment to provide all children, young people and their families with the right support at the right time, so that every child and young person can reach their full potential.

"I am a single parent carer to two children and my own mum. I also have my own disabilities. There is not enough help and I am told my son's conditions are not severe enough to warrant support. I am mentally and physically drained and it has a negative impact on my health. No one cares. I ask for help but no one is interested until you hit rock bottom, what about services to support you before that actually happens."

[Unpaid carer, State of Caring 2025]

And, with **42%** of parent carers saying they spend between £100 and £500 each month on the extra costs of caring such as specialist food, incontinence products and support from paid care workers, it is perhaps not surprising that such activities become "*nice to have"* but "*first to go"* when faced with the daily struggle to make ends meet.

"Costs for items for disabled children eg. sensory items, safe foods etc are expensive and as time goes on it becomes harder to afford things."

[Parent carer, State of Caring 2025]

"Because CAMHS have such long waiting lists I have had to obtain private services for my son, the costs are high and there is no shared care available anymore in the Lothians. I feel my son has been completely abandoned by the NHS."

[Parent carer, State of Caring 2025]

The costs of support are also increasing and **60%** of parent carers said they were struggling to afford these due to the increased cost of living. There will a tipping point, for some already reached, where parents simply cannot afford the support, they and their child require, and which both should have a right[11] to expect.

"After school club group costs rise every year and the care provided is not getting better."

[Parent carer, State of Caring 2025]

Finally, there remains work to be done to ensure that parent carers and their children can maximise their incomes. Despite half **(59%)** of parent carers in State of Caring being in receipt of a means-tested benefit, only **43%** indicated that they were actually in receipt of Scottish Child Payment. This is despite means tested benefits being a route into eligibility for the payment.

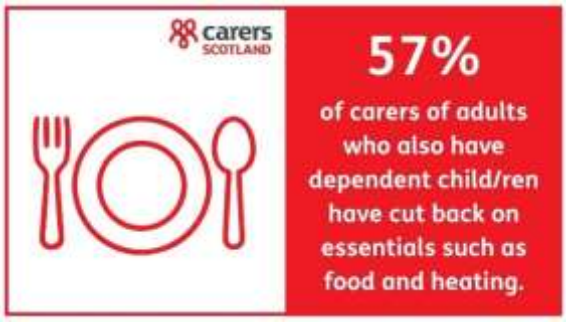
This may indicate a gap in information, advice, and income maximisation services for parent carers to ensure that they, and their children, are receiving all the support to which they are eligible. With a complicated landscape of both devolved and reserved benefits and other financial support which unpaid carers are forced to navigate, it is vital that this gap is explored **and** bridged by both Governments, and by local government.

[11] The UNCRC, which was incorporated into Scots Law, means that as well as keeping children healthy, happy, and safe, children's human rights also help support and protect the family by recognising the importance of families, however they may look, in children's lives. The UNCRC points out what support parents and carers should receive from the government to support their children to thrive and live fulfilled lives. Read more: https://www.childrenfirst.org.uk/news/what-uncrc-incorporation-in-scottish-law-means-for-children/

Carers of adults with dependent children

State of Caring 2025 also showed that unpaid carers who provide care for an adult and also have dependent child/ren face similar and significant financial strain.

The results mirror much of the financial strain reported by parent carers of disabled children, with **29%** struggling to make ends meet, **18%** living with debt and **50%** taking out bank loans, using credit cards or bank overdrafts to get by.



More than half **(57%)** have cut back on essentials such as food and energy because of the financial cost of their caring role. Four in ten **(42%)** are spending between £100 and £500 extra each month on the extra costs of caring.

Half (**49%)** have reduced working hours or given up paid employment to provide care, making it even harder to make ends meet.

A quarter **(27%)** had cut back, paused or stopped paying into their pension, risking financial insecurity for their future.

More action is needed to reduce child poverty in households affected by disability

The preceding sections provide clear evidence of the financial struggle faced by families with children in households affected by disability. Both parent carers with a disabled child and carers of adults with dependent children are significantly affected. The impact of disability on household incomes is key and is also evidenced by the 42% of children who live in very deep poverty who have someone in their family who is disabled[12].

The Scottish Government have taken positive steps taken to recognise this. As noted earlier, the inclusion of carers of disabled children and adults as a priority group in the Child Poverty Delivery Plan is welcome as is their commitment[13] to remove the two-child limit within Universal Credit from March 2025. The two-child limit is a key driver of child poverty[14] and modelling[15] suggests 20,000 fewer children will be living in relative poverty in 2026-27 as a result.

However, much more coordinated action is needed. This means, for example, increasing access to affordable and accessible childcare *and* social care to allow unpaid carers to be in paid employment, tailored employability support[16] for carers, and a social security system that guarantees that all families can afford the essentials of life[17].

[12] Cebula, C, Children being left behind: deep poverty among families in Scotland. York: Joseph Rowntree Foundation (2025)
[13] Scottish Government news release (2025)
[14] Reducing child poverty: role of the two-child limit: Child Poverty Action Group (2025)
[15] Child poverty modelling: update, Scottish Government (2025)
[16] Unlocking the Door: Carers Scotland (2024)
[17] Guarantee our Essentials: reforming Universal Credit to ensure we can all afford the essentials in hard times, Joseph Rowntree Foundation (2025)

Cost of caring to employment and education

State of Caring 2025 provides clear evidence that cost of caring to unpaid carers lives is significant, limiting their opportunities to take part in paid work, build their careers and undertake education and lifelong learning.

The ability to be in paid employment is critical to the financial security of unpaid carers, both in the short and long term. Carers Scotland research[18] has identified that the difficulty that carers experience in staying in paid work is a key driver of carer poverty.

In State of Caring 2025, two in five **(40%)** unpaid carers said that they had reduced their working hours or given up paid employment to manage their caring responsibilities.

Even when unpaid carers were able to remain in the workplace, caring also impacted on their career and employment experience.

For one in five (**20%)** unpaid carers said this meant limiting their chances to build their career by attending training or professional development courses at work and for a third **(37%)** that it made it hard to build relationships with colleagues because their opportunities to attend social and networking events were curtailed by their caring responsibilities. For a significant proportion of carers, their emotional wellbeing was impacted, by attempting to juggle work with their caring responsibilities. Nearly two thirds **(65%)** said they felt stressed or anxious at work, and a similar proportion **(63%)** said that caring impacted on their ability to concentrate at work and be as productive as they would like.

The consequences of caring can also limit other opportunities. One in seven **(15%)** unpaid carers said that the financial strain of caring meant that they had been unable to afford to go to university or college, or attend education or training courses. This increases to **21%** for disabled carers and to **30%** for those carers in receipt of means-tested benefits.

Being unable to take these opportunities limits the chances of unpaid carers to gain skills needed for their future, including further learning, to return to work or to access higher paying employment. But it also limits opportunities to enjoy vocational and leisure courses, to support carers wellbeing and provide a break from caring.

We discuss how access to social care is critical for health and wellbeing later in this report but it is also a critical factor in enabling unpaid carers to access employment and education. Carers have consistently identified its importance and, again in State of Caring 2025, made it clear that **good**

[18] Poverty and financial hardship of unpaid carers in Scotland A WPI Economics Report for Carers Scotland (2024)

quality social care support is crucial in enabling them to balance their life with their caring responsibilities, and in supporting their career opportunities. This included including returning to employment **(7%)**, applying for a higher-level job or a job that is better suited to their skills and experience **(9%)** or increasing their working hours in paid employment **(10%)**.

For almost a quarter **(23%)** of unpaid carers good quality social care was critical in supporting them to sustain and thrive in their current paid employment role, creating time for rest, and making it easier to concentrate at work without worrying about the person they care for.

I wouldn't be signed off work twice a year with burnout and depression Currently considering reducing my employment hours to help me cope. Also just need some time to sleep/rest.

[Unpaid carer in paid work, State of Caring 2025]

In addition to the cost of inadequate social care to unpaid carers' employment prospects, earned income, and future pensions, the cost of care and support reduces savings, increases debt and leaves carers facing anxiety and financial insecurity. One in seven **(15%)** of carers say that good quality social care services would enable them to feel financially secure but the cost of care leaves many carers facing an uncertain future.

Residential care is cripplingly expensive. I live with constant anxiety about the way our resources are being burned through by care home fees. There has to be a fairer way to cover care costs that doesn't run a household into the ground. I am facing my own old age being a time of financial insecurity because my husband had to go into care at a relatively young age. It's really frightening and I don't see the system ever changing to ensure my security. So not only am I invisible to the system as the spouse of a care home resident but will also end up impoverished into the bargain.

[Unpaid carer in paid work, State of Caring 2025]

Cost of caring to health

State of Caring 2025 shows that the cost of caring to the health and wellbeing shows no signs of improving, with increasing damage to physical and mental health, exacerbated by financial insecurity and a lack of support.

Carers physical health

A third of unpaid carers **(30%)** in State of Caring 2025 reported that they had bad or very bad physical health. This is a small increase from 28% in 2024[19] and is part of the poor physical health that is consistently reported by carers, one that shows no signs of improving. Carers on lower income were more likely to report that they are in poorer health. For example, carers who in receipt of means-tested benefits are **40%** more likely to be in poor physical health than carers overall, as shown in table one below.

Table 1: Physical Health	**% of carers with bad or very bad physical health**
All carers	30%
Struggling to make ends meet	44%
In receipt of means tested benefits	42%
In receipt of Carer Support Payment	40%
Caring for 10 years or more	37%
Caring for 35 hours or more	35%

Poor physical health is also reflected in the ability of unpaid carers to be in paid employment. Over one in five carers **(21%)** reported that they had previously worked as a full or part-time employee but had been forced to give up work due to a health condition or health issue that was caused or worsened by their caring responsibilities.

Over half of unpaid carers **(51%)** reported being unable to exercise or be as physically active as they would like. This reflects the time constraints, fatigue, and lack of support that many carers experience. For those providing intensive care of 35 hours a week or more, it rose to **57%.** Clearly, finding time for physical activity can be extremely difficult for carers. This lack of opportunity not only affects physical health but can also contribute to poorer mental wellbeing including experiencing stress, anxiety, and depression.

Previous State of Caring research showed that unpaid carers often neglect their own health because of the demands of caring. In 2023, State of Caring found that four in ten **(41%)** carers had put off their own healthcare treatment[20] and earlier this year in research for Carers Week, **24%** of current or former carers said that they had postponed or cancelled a medical appointment, test, scan, treatment or therapy because of their caring role[21].

[19] State of Caring in Scotland 2024: Health and social care support for unpaid carer, Carers Scotland (2025)
[20] State of Caring 2023: A health and social care crisis for unpaid carers in Scotland, Carers Scotland (2023)
[21] Caring about Equality, Carers Week 2025, Carers UK (2025)

In State of Caring 2025, unpaid carers once again shared their experiences of having little choice but to ignore their own health needs because of the demands of caring, and of these health needs being exacerbated by their caring role.

"I have ignored my own pain."
[Unpaid carer, State of Caring 2025]

"No time to work on my own health and the duties of caring have worsened my health significantly."
[Unpaid carer, State of Caring 2025]

The cost of caring on physical health is evident. Unpaid carers are all too often forced to prioritise the needs of others over their own, leading to exhaustion, health issues, and a reduced ability to protect and improve their own health. Without adequate support, the physical cost of caring will continue to grow, leaving carers with long term damage and, with the subsequent risk of care breaking down, placing further strain and costs onto health and social care systems.

Carers mental health

In this year's State of Caring, a significant number of unpaid carers stated that they had poor mental health. This year, nearly a third **(34%)** of carers reported that their mental health was bad or very bad, this was a slight decrease from last year's figure (36%)[22] but continues to show a significant and worrying trend of poor mental health amongst carers.

As with physical health, unpaid carers who were struggling financially were more likely to report poor mental health. More than half **(52%)** of carers who were struggling to make ends meet had bad or very bad mental health, the highest levels of poor mental health in State of Caring 2025.

Table 2: Mental health	**% of carers with bad or very bad mental health**
All carers	36%
Struggling to make ends meet	52%
In receipt of Universal Credit	50%
In receipt of Carers Support Payment	42%
Caring for 10 years or more	39%
Caring for 35 hours or more	40%

These findings are reinforced by just some of the comments received from unpaid carers themselves, further illustrating the huge personal impact that caring is having on their mental health.

"I feel tired most days and sad. I cry a lot."
[Unpaid carer, State of Caring 2025]

[22] State of Caring in Scotland 2024: Health and social care support for unpaid carer, Carers Scotland (2025)

"My caring role makes me feel incredibly stressed all the time."
[Unpaid carer, State of Caring 2025]

"My mental health is shattered. I feel on the verge of a breakdown all the time"
[Unpaid carer, State of Caring 2025]

Feeling undervalued also had a negative impact on health and wellbeing. Only **18%** of unpaid carers who responded to the State of Caring 2025 said that their caring role is rewarding and makes them feel valued. Alarmingly, much higher numbers of carers reported negative feelings towards their caring role. Nearly three quarters **(73%)** of carers reported feeling stressed or anxious because of their caring role. Meanwhile, more than a third **(37%)** said that they felt depressed.

These findings highlight the profound cost of caring to the mental health of unpaid carers. Many carers are managing complex and demanding responsibilities but doing so at the expense of their own wellbeing. Without urgent action to address the pressures carers face, the cost to their mental health will continue to rise, with serious consequences for individuals and society alike.

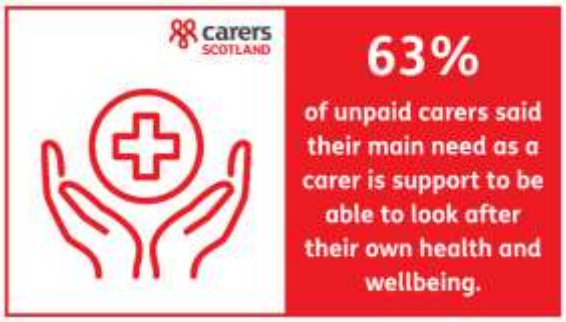
It is clear from State of Caring 2025, and results over a period of many years, that having a caring role takes a serious toll on unpaid carers' physical and mental health and wellbeing. Access to health care, mental health support, and opportunities to rest are essential to preventing burnout and ensuring carers can continue providing care without compromising their own health.

Support to prevent the cost of caring

Unpaid carers need support to prevent the financial, health and opportunity costs of caring. Unfortunately, such help is sorely lacking, with access to health care services out of reach, social care support critically under resourced and breaks from caring limited for too many carers.

Health support for carers

Unpaid carers need the right support to help them look after their own health. Two thirds **(63%)** of carers identified that help to look after their own health and wellbeing was one of their main needs, the most selected need for the second year in a row. This reflects the ongoing strain carers face and the urgent need for more responsive support systems.



However, key barriers remain that prevent unpaid carers from caring for their own health. In the first instance, as outlined in the previous section, carers struggle to have the time to be able to attend healthcare appointments, including secondary care and screening. This has profound implications for their current and future health that cannot be overstated.

The National Carers Strategy[23] set out that the Scottish Government would *"consider how to provide flexible health appointments for carers, including how we provide replacement care for appointments"*. However, to date developments in this area have been limited and it is increasingly unlikely that any measurable actions or investment will be put in place before the next Scottish Parliament elections. This means that, yet again, unpaid carers health is left to deteriorate with no real urgency placed on this growing health crisis.

Recognition of unpaid carers by health professionals remains a key barrier to accessing support. Just over a third of carers **(34%)** said that the GP of the person they care for, or someone else within their GP practice (e.g. district nurse, health visitor), was unaware of their caring role.

In secondary care, this figure rose to **46%**, with unpaid carers reporting that consultants or other professionals such as advanced nurse practitioners, physiotherapists, or psychologists were unaware of their role. Without recognition, carers often miss out on tailored support, flexible appointments, or referrals to services that could help them manage their own health.

Technology has the potential to ease some of this burden. Nearly half **(48.5%)** of carers said that digital tools for staying connected, such as Zoom, FaceTime, or WhatsApp, make their caring role easier, whilst **31%** found remote monitoring tools like fall detectors and GPS trackers helpful. These innovations can offer reassurance, reduce isolation, and provide practical support.

[23] National carers strategy, Scottish Government (2022)

Unpaid carers also expressed a strong interest in accessing digital health services. **63%** said they would like to use the NHS app if it were rolled out in Scotland, highlighting a clear demand for more integrated and accessible digital tools to help manage care.

These findings highlight the need for a coordinated approach to supporting unpaid carers—one that combines accessible social care, digital innovation, and investment in carers' health and wellbeing.

Social care support for carers

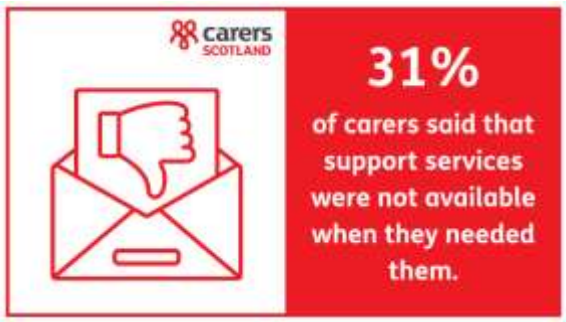
The growing demands placed on unpaid carers and the cost of caring on the lives of carers are closely linked to a lack of adequate social care support.

However, rather than receiving the support they need, half **(50%)** of unpaid carers responding to State of Caring 2025 reported an increase in their caring hours over the past year, with many stepping in to fill gaps left by stretched or unavailable services.

Social care support for they and the person they care for is essential for unpaid carers. Ensuring carers receive the right support not only benefits them but also improves outcomes for the person they care for. State of Caring 2025 asked carers what support they and/or the person they care for received from a long list of all social care services provided by the public, independent and third sectors. This included paid care workers, home adaptations, day services, care homes for short breaks, other breaks services, residential care, after school support for disabled children and activities from local carers organisations and charities.

It is of signification concern that four in ten **(42%)** of carers said they received support from none of these services.

Amongst those who had sought support, the most common challenge was long waiting times, with **34%** reporting delays in assessments or reviews and **31%** delays in receiving a service.



Nearly a third **(31%)** of carers said that services were simply not available when they needed them.

Other concerns included the quality and consistency of care: **24%** expressed dissatisfaction with the standard of care, and **25%** highlighted issues with inconsistent staffing. A third **(30%)** of carers simply did not know who to contact or what support might be available.

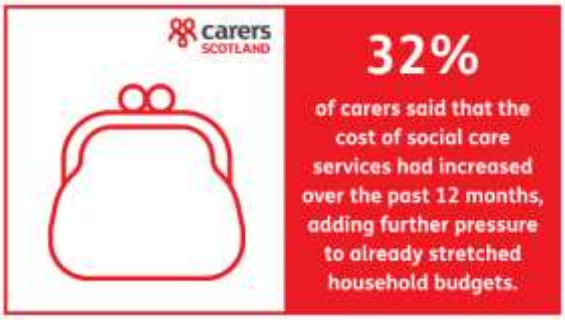
"Adaptations not being suitable for the person so continuing to 'make do'"

[Unpaid carer, State of Caring 2025]

"Being told that my mother does not qualify for help with residential care as she manages a shower herself."

[Unpaid carer, State of Caring 2025]

In addition to concerns about quality and consistency, affordability emerged as a significant issue. Nearly a third of unpaid carers **(32%)** reported that the cost of social care services had increased over the past 12 months, adding further pressure to already stretched household budgets.



State of Caring 2025 makes it clear that the absence of good quality social care is a major contributor to the cost of caring. Two thirds **(62%)** of unpaid carers said that having access to reliable, high-quality support would make their caring role less stressful, whilst **59%** said it would allow them to spend time on activities that improve their own wellbeing. These figures highlight how the lack of adequate social care acts as a barrier to carers maintaining their health both physically and mentally.

Clearly State of Caring 2025 again shows that unpaid carers are struggling to access adequate social care support. These gaps not only increase stress and burnout but also undermine carers' ability to continue in their roles safely and sustainably. Rising costs of care services further compound the pressure, leaving many carers stretched financially and emotionally. When social care works well, it can reduce stress, prevent burnout, and allow carers to maintain their own health and quality of life. Investing in accessible, affordable, and consistent social care should not just be seen as supporting carers, it's about sustaining health and care systems by allowing carers to stay well.

Insufficient breaks from caring

Access to social care enables unpaid carers to take breaks from caring is essential in ensuring that carers can stay well, are able to balance their caring responsibilities and continue their role without reaching crisis point.

Previous State of Caring research showed that unpaid carers continue to care without time off their responsibilities. Research from Shared Care Scotland indicates that only 7.5% of unpaid carers regularly or frequently receive breaks from caring[24]. This trend continues in State of Caring 2025, with only **13%** of carers reported being able to access breaks using formal break services.

[24] Exploring Unpaid Carers' Experiences of Short Breaks and Respite Care, Shared Care Scotland (2025)

This stands in stark contrast, with **52%** of unpaid carers who said that a break or time off from the caring role was one of their main needs. These findings are reinforced by comments from carers themselves, which further illustrate how difficult taking a break from caring can be.

"I do not get any formal breaks or time off from caring- I am ALWAYS on call because there is no one other than my immediate family (all of whom I provide care for) to take my place"
[Unpaid carer, State of Caring 2025]

"We are desperate for a break."
[Unpaid carer, State of Caring 2025]

"Only given 2 hours respite support is a joke and an insult."
[Unpaid carer, State of Caring 2025]

The Care Reform (Scotland) Act 2025[25] introduced a new right to a break for unpaid carers, which could be transformative for carers. A date when this right will come into place has still to be announced[26] but for this right to be a real and lasting one for unpaid carers, it will require current and future Scottish Governments to prioritise sufficient funding and support to develop and deliver a wide range of short breaks to meet the diverse of carers including those with protected characteristics and who live in rural and island communities.

Access to Adult Carer Support Plans

The Carers (Scotland) Act 2016 introduced the right to an Adult Carer Support Plan (ACSP) for all adult carers, and a Young Carer Statement (YCS) for young carers. The responsibility authority (which may be a health and social care partnership or a local council) must offer and prepare an Adult Carer Support Plan to anyone they identify as a carer (and who wishes) a plan or any carer who requests one[27].

Nearly 10 years on from the introduction of this right, State of Caring 2025 found that just **24%** of unpaid carers said they had received an ACSP in the last 12 months. Whilst this is a slight improvement from 20% in 2024[28], it continues to mean that three quarters (76%) of carers had not had an assessment of their needs in the last year. Moreover, many carers who had received a plan expressed dissatisfaction with both the outcomes and the process for assessment itself.

"I completed an assessment last year.
Made no difference whatsoever to my caring role."
[Unpaid carer, State of Caring 2025]

[25] Care Reform (Scotland) Act 2025 https://www.legislation.gov.uk/asp/2025/9
[26] As at November 2025
[27] Carers' charter: Your rights as an adult carer or young carer in Scotland, Scottish Government (2018)
[28] State of Caring in Scotland 2024: Health and social care support for unpaid carer, Carers Scotland (2025)

"Never actually had a proper carers assessment as always get fobbed off."
[Unpaid carer, State of Caring 2025]

Support with hospital discharge

The Carers (Scotland) Act 2016 placed a duty on NHS boards to involve and inform unpaid carers during the discharge process of the person they care for[29]. This ensures that carers are consulted on plans for discharge and provided with relevant information about the needs of the person they care for, follow-up appointments, and support services to be provided. This should include support and assessment for their needs as a carer, including an Adult Carer Support Plan (ACSP).

Just a third (**34%)** of unpaid carers said that they were involved in the decisions about their cared for person's discharge from hospital and what care and treatment they needed. Only **13%** had been asked about their ability or willingness to provide care, down from 19% in State of Caring 2024[30] and just **12%** said they had been provided with sufficient support and services to protect their health and wellbeing of the person they care for.

The lack of involvement in discharge is worse for certain groups of unpaid carers, for example carers with a disability. Only **29%** of disabled carers said that they had been involved in decisions about discharge. Despite already managing their own disabilities, these carers are receiving less support from healthcare professionals, with more than half **(55%)** of carers with disabilities saying their main need is more support from the NHS or healthcare professionals. Clearly, more should be done to offer carers with their own disabilities or health conditions better support that accounts both for their additional needs and the support they need to care.

[29] Carers' charter: Your rights as an adult carer or young carer in Scotland, Scottish Government (2018)
[30] State of Caring in Scotland 2024: Health and social care support for unpaid carer, Carers Scotland (2025)

Conclusion and recommendations

The findings from State of Caring 2025 paint a stark picture of a cost of caring – a cost that is far too high. Unpaid carers continue to face significant financial struggle, debt and employment insecurity, with opportunities curtailed, careers lost and pensions damaged – all because they care. These struggles are deeply entrenched, with too many carers facing impossible choices.

And in the area of greatest priority for national and local government – eradicating child poverty – too many parent carers and unpaid carers with dependent child/ren are being simply being left behind.

The Scottish Government has launched its long-term plan to improve the health of the nation but at the same time the health of unpaid carers continues to deteriorate and few concrete actions to address this pressing need of carers are in place. It appears that, for far too long, the damaging cost to carers' health and wellbeing has been deemed to be acceptable by decision-makers nationally and locally. This is simply unacceptable.

Unpaid carers have paid the price for decades and the challenges they face are growing, exacerbated by the funding and demand pressures faced by health and social care services.

This lack of adequate support, whether through healthcare access, social care provision, or opportunities for breaks from caring, has left many unpaid carers feeling overwhelmed, undervalued, and burned out. This must change.

Recommendations

The current Scottish Government should build on its commitment to unpaid carers by:

- investing in carers in the Scottish Budget, in particular by increasing voluntary sector short break funding.
- delivering tangible progress ahead of the 2026 election in building a robust plan to deliver a right to a break from caring
- undertaking a targeted review of its long-term plan for health and social care to ensure that the needs of unpaid carers are built in within the foundations, including ensuring that data is collected on the health of carers and published annually.

A future Scottish Government should tackle the cost of caring by ensuring that:

All unpaid carers are supported:

- Guarantee all unpaid carers can fully benefit from their right to a break by establishing a national task force to oversee a national short breaks improvement plan, and by ensuring there is sufficient investment to deliver this right.
- Increase funding for social care services, including targeting at least 20% of Carers Act funding to carers centres (in addition to the funding they currently receiving), recognising their essential role in alleviating pressure on the NHS and safeguarding the health and wellbeing of unpaid carers.

All unpaid carers are able to stay well:

- Deliver a dedicated 'Tackling Carer Health Inequalities' Strategy for Scotland, backed by targeted investment, to give unpaid carers access to annual health checks, flexible appointments, and regular screening across primary and secondary care. This plan should include providing annual health checks, flexible GP and hospital appointments, and improved access to regular screening for unpaid carers.
- Ensure all unpaid carers can access support locally for their mental health and wellbeing, by investing in counselling and emotional support services, including those through local carer support organisations

All unpaid carers are financially secure:

- Commit to introducing a Minimum Income Guarantee for unpaid carers to provide a solid foundation for their lives and future. Through a combination of fair paid work, supportive services, reduced costs and better social security, carers should have the right to a minimum standard of living and ability to afford the essentials of life.
- Develop the system of social security for unpaid carers by reviewing Carer Support Payment, increasing its value and making it available to more carers, including introducing a recognition payment for older adult carers. Consider the evidence and undertake a pilot of Scottish Child Payment for carers in receipt of Carer Support Payment to deliver greater action in ensuring that that the poverty rate of households with children who are affected by disability is reduced.
- Reduce the costs of care, including ending all charging for non-residential social care
- Ensure that all carers who wish to can remain in or return to work by requiring all organisations with public funding to be Carer Positive employers, supporting of their employees who are carers.

Appendix 1: Respondent demographics

The demographic breakdown of unpaid carers responding to State of Caring 2025 is as follows:

- 84% female, 15% male with the remainder (less than 1%) preferring to self-identify as either non-binary or transgender.
- 4% aged 18-34, 13% aged 35-44, 26% aged 45-54, 31% aged 55-64, and 24% aged 65 and over.
- 30% have a disability using the definition used under the Equality Act
- 98% white Scottish, Irish or other white; 2% mixed/multiple or other ethnic groups
- 92% heterosexual, 3% gay, lesbian or bisexual, the remainder preferred not to say or skipped this question.
- 46% in employment or self-employed, 22% retired and 18% looking after the home/family/dependants full-time
- 1% have been caring for less than a year, 5% have been caring for 1-2 years, 24% for 2-5 years, 25% for 5-10 years, 26% for 10-20 years and 19% for more than 20 years.
- 18% provide 1-19 hours of care per week, 10% provide 20-34 hours of care pre week,
- 15% for 35-49 hours and 14% for 50-89 hours, 42% provide 90 or more hours of care per week.

Carers responding to State of Caring 2025 provided information about who they care for and the conditions the person(s) live with:

- 37% caring for a parent/parent-in-law, 32% caring for a spouse or partner, 21% for an adult son or daughter/son-in-law or daughter-in-law, 19% for a child aged 18 or under, 9% for another relative and 3% for someone else eg. a friend or neighbour.
- 18% caring for someone aged under 18, 23% for someone aged 18-34 years, 25% for someone aged 35-64 and 56% for someone 65 or over.

Respondents were caring for people with a range of health conditions and/or disabilities. Respondents could select all conditions that applied and may be caring for someone for multiple conditions.

- Autism, ADHD, or another neurodiversity - 30.73%
- Needs that arise from being older (e.g. support with mobility) - 25.73%
- Mental health condition - 24.89%, Eating disorder - 2.58%
- Dementia - 22.58%
- Physical disability- 21.12%, Cerebral palsy - 3.48%
- Neurological condition - 21.07%, ME or chronic fatigue syndrome – 3.31%
- Joint problem (e.g. arthritis or osteoarthritis) - 19.61%
- Incontinence - 19.33%, Urinary disorder - 6.46%
- Learning disability - 18.31%, Down's Syndrome - 2.47%
- Sensory impairment (e.g. blindness or vision loss, deafness or hearing loss, sensory processing issues)- 15.96%
- Long term condition such as heart - 15.62%, Diabetes - 11.69%, Lung disease or breathing condition – 10.51%, Bowel disease or disorder 5.96%, Kidney or Liver diseases – 4.78%, Long COVID - 1.57%, Blood disease (e.g. anaemia, blood disorder) - 1.69%
- Addiction (e.g. gambling, drugs, alcohol or other addiction) - 4.94%
- Cancer - 6.24%, Palliative or end of life care - 1.85%
- Other - 10.39%

Carers Scotland is Scotland's membership charity for unpaid carers. We work to represent and support the approximately 800,000 people in Scotland who provide unpaid care for ill, older or disabled family members or friends – fighting for increased recognition and support for all carers and to ensure they have a voice in the issues that affect them.

Advice for carers

For information, advice and signposting, call our Helpline **0808 0808 7777** (Mon-Fri, 9am – 6pm) or email **advice@carersuk.org.**

Information

Our **website** provides comprehensive information for carers an all apects of caring to support you in your caring role.

Share and learn

We offer a range of **online carer information sessions** and wellbeing activities like yoga and art - time for you that fits around caring.

Connect with carers

Our online **Care for a Cuppa** sessions offers a space for unpaid carers to meet other carers, share experiences and find support.

Bcome a Carer Positive employer

Carer Positive raises awareness, supports and recognises **employers** who help carers to balance the demands of work and caring. Find out more at: carerpositive.org

Training

From webinars,to informal lunch and learns, training courses and partnership working, we are here to **support you and your staff** in your work with unpaid carers.

Join Us

Join us for support, understanding and lasting change However caring affects you and your family, we're here for you. Membership is free.

Find out more:

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